I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under	
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears	
above, or on an attachment with all other like empowered.	

TS

SIGNATURE: MENACHEM SPALTER

I

Electronic Signature of Signing Officer/Director Detail

DAVIE, FL 33330 US

#### FEI Number: 46-4865058

#### Name and Address of Current Registered Agent:

SPALTER, MENACHEM M 12945 SW 34TH PLACE DAVIE, FL 33330 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	: MENACHEM M SPALTER			03/29/2016	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	Р	Title	D		
Name	SIMPSON, LEVI Y	Name	BRODY, CHAIM B		
Address	7190 ELBROOK AV	Address	1270 NE 175TH STREET		
City-State-Zip:	CINCINNATI OH 45237	City-State-Zip:	N. MIAMI BEACH FL 33162		
Title	D	Title	TS		
Name	RAKISN, MICHAEL	Name	SPALTER, MENACHEM M		
	1384 CARROL ST 7B	Address	12945 SW 34TH PLACE		
		City-State-Zip:	DAVIE FL 33330		
City-State-Zip:	BROOKLYN NY 11213				

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N14000001607

Entity Name: CHABAD LUBAVITCH OF WEST DAVIE, INC.

## **Current Principal Place of Business:**

12945 SW 34TH PLACE DAVIE, FL 33330

# **Current Mailing Address:**

12945 SW 34TH PLACE

Certificate of Status Desired: No

FILED Mar 29, 2016

Secretary of State

CC6692692042

03/29/2016 Date